

REMARKS

Claims 1, 2, 5-7, 9, 10 and 13-23 are pending in this application. Claim 1 has been amended to clarify that the liner forms substantially spherical interior volume when placed in the sac of the aneurysm. Claims 15-23 have been newly added. Based on following remarks, reconsideration and allowance of this application is respectfully requested.

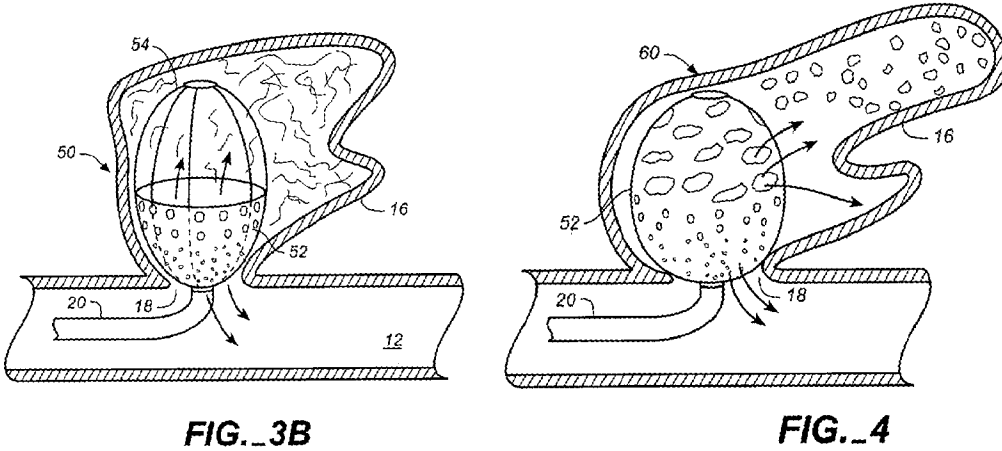
Claim rejections under 35 U.S.C. §102 (e)

Claims 1, 2, 5-7, 9, 10, 13 and 14 stand rejected under 35 U.S.C. §102(e), as being allegedly anticipated by U.S. Patent No. 6,45,780 ("Wallace"). A claim is anticipated only if each and every limitation as set forth in the claim is found, either expressly or inherently described, in a single prior art reference. (MPEP §2131). Applicants respectfully request reconsideration and withdrawal of this rejection, since Wallace does not disclose each and every limitation required by these claims, as amended.

Independent claim 1 recites a method of occluding an aneurysm, the aneurysm having a neck and a sac, the method comprising delivering a liner into the aneurysm, the liner having a proximal portion and a distal portion, where the distal portion of the liner is more permeable than the proximal portion of the liner, and where the liner is delivered so that the proximal portion of the liner extends across the aneurysm neck and the distal portion of the liner is positioned within the aneurysm sac the aneurysm sac, the liner defining a substantially spherical interior volume. The method also comprises introducing embolics through an opening in the proximal portion of the liner into the substantially spherical interior volume of the liner, wherein the distal portion of

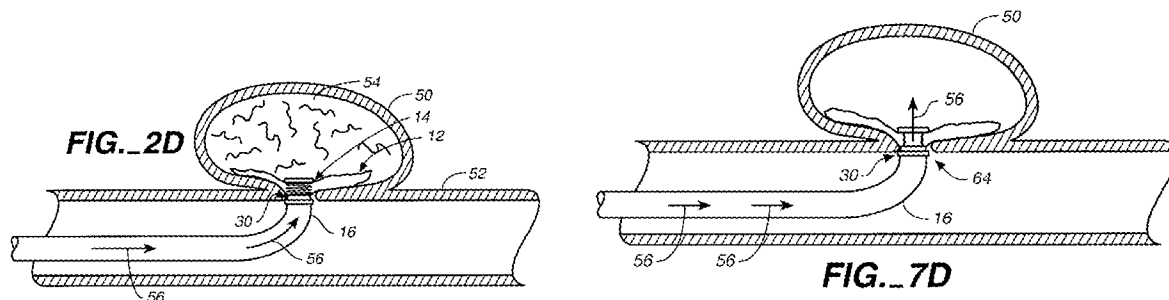
the liner allows preferential permeation of the embolics from the substantially spherical liner interior volume into the sac of the aneurysm.

By way of illustration, see figures 3B and 4 of the above-identified application:



In contrast, Wallace discloses a method for occlusion the neck portion of an aneurysm by delivering a collapsible neck bridge, constricting the neck bridge at the neck of the aneurysm and delivering an embolic agent “along the path demonstrated by arrows 56, through elongated delivery member, through joint 30 (a detachment point), through a conduit formed through a retracted device 64 in to the aneurysm 50” (Col 12, lines 7-8, Fig. 7D) (Emphasis added). Also, the collapsible neck bridge “actuation mechanism 14 forms a conduit from which an embolic agent can be delivered” (Col. 8, lines 8-10, Fig. 2D).

See figures 2D and 7D of Wallace:



Applicants respectfully disagree with the statement in page 4 of the Final Office Action: “It is noted that annotated below fig. 7a discloses such embolics introduced through an opening in the proximal portion of the liner into an interior volume of the liner.” Actually, Wallace does not disclose or suggest a method of introducing embolics into the device of Fig. 7A where the device is deployed having the same configuration shown in figure 7A. Instead, Wallace discloses the acts of delivering the device of Fig. 7A into an aneurysm sac, constricting the device into a deployed configuration (see Fig. 7D), and introducing embolics through a conduit formed by the retracted device or an actuation mechanism. (Col 12, lines 7-8). Thus, Wallace does not disclose or suggest a method of introducing embolics through an opening in the proximal portion of the liner into a substantially spherical interior volume of the liner, as recited by claim 1.

Applicants further disagree with another statement in page 4 of the Final Office Action: “the act of preferential permeation of the embolics from a liner interior volume into the aneurysm is possible in Wallace, since fig. 7a discloses aneurysm obstruction device 64 having parachute configuration which has an interior volume.” Even though Fig. 7A of Wallace depicts a neck bridge having an “inverted parachute configuration”, the act of deploying the device before introducing embolics into the same and the aneurysm sac, is the act of constrict and flatten out the device. Thus, the act of preferential permeation of the embolics from a liner substantially spherical interior volume into the aneurysm is not possible in Wallace, since the device of Wallace is constricted when deployed and could not form a substantially spherical interior volume.

For at least these reasons, Applicants respectfully submit that independent claim 1, along with claims 2, 5-7, 9, 10, 13 and 14, which depend directly or indirectly from

claim 1, are not anticipated by Wallace, and as such, request withdrawal of the §102 rejection of these claims.

New Claims

Applicants submit that newly added claims 15-23 find support in the specification, as originally filed, and are patentable over the cited reference for at least the same reasons as independent claim 1.

CONCLUSION

For the reasons set forth above, Applicants respectfully submit that the currently pending claims are patentable over the cited prior art. A notice of allowance is respectfully requested.

If there are any questions concerning this amendment and response, please contact the undersigned at the number below.

Respectfully submitted,
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